

Appl. No. 09/846,975
Amdt. dated January 8, 2004
Reply to Office action of October 8, 2003

PATENT



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

3a
2-5-04

In re the application of:

John S. Packer

Application No: 09/846,975

Filed: May 1, 2001

For: Expander Device for Isolating Bus Segments
in I/O Subsystem (amended)

Group Art Unit: 2189

Examiner: C.H. Knoll

Atty. Docket No: ADAPP190

Date: January 8, 2004

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450 on January 8, 2004.

Signed: _____

Kay Harlow

AMENDMENT

Honorable Commissioner for Patents
Alexandria VA 22313-1450

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JAN 14 2004

Technology Center 2100

Dear Sir:

In response to the Office Action dated October 8, 2003, the term to respond extends to January 8, 2004. Please enter this amendment and remarks.

Amendments to the Specification begin on page 2 of this paper.

Amendments to the claims are reflected in the listing of claims which begin on page 3 of this paper.

Remarks/Arguments begin on page 8 of this paper.

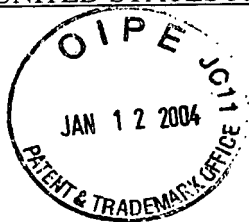
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

John S. Packer

Application No: 09/846,957

Filed: May 1, 2001

For: EXPANDER DEVICE FOR ISOLATING BUS
SEGMENTS IN I/O SUBSYSTEM (amended)

Attorney Docket No: ADAPP190

Examiner: C.H. Knoll

Group Art Unit: 2189

Date: January 8, 2004

CERTIFICATE OF MAILING

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Signed: _____

Kay Harlow

Mail Stop: Non-Fee Amendment
Commissioner for Patents
Alexandria, VA 22313-1450

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JAN 14 2004

Technology Center 2100

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After Amendment	Highest Previously Paid For	Present Extra	SMALL ENTITY RATE FEE	OR	LARGE ENTITY RATE FEE
TOTAL CLAIMS	17 -	28	00	X09 = \$	OR	X18 = \$
INDEP CLAIMS	02 -	03	00	X43 = \$	OR	X86 = \$
[] Multiple Dependent Claim Present and Fee Not Previously Paid				\$145		\$290
TOTAL				\$		\$ 0

- ☐ Applicant(s) hereby petition for a _____ month(s) extension of time to respond to the outstanding Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-0805.
- ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.
- ☒ If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-0805 (Order No. ADAPP190). A copy of this sheet is enclosed.

Respectfully submitted,
MARTINE & PENILLA, LLP

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